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		•	_							
Cor	ntractor Name:	Contract Number:	Report Period:	Advance Request:	Adjustment ¹					
Pre	pared By (Print Name/Title):	E-mail:		Telephone Number:	Fax Number:					
	,									
10 -	- ADMINISTRATIVE COSTS				REPORT PERIOD EXPENDITURES					
1.	Administrative Costs				\$					
20 -	OTHER PROGRAM COSTS									
2.	Financial Audit				\$					
3.	Health and Safety Measures (From									
4.	Leveraging									
5.	Liability Insurance									
6.	Other Labor Costs									
7.	Other Miscellaneous Program Co	sts								
8.	Training and Technical Assistanc	e								
9.	Vehicle and Equipment (Acquisit	ion Costs)								
10.	TOTAL OTHER PROGRAM (\$								
30 -	- PROGRAM COSTS									
11.	Client Education				\$					
12.	Direct Program Activities (From	Section 165 Line 133)								
13.	Intake									
14.	Outreach									
15.	Workers' Compensation									
16.	TOTAL PROGRAM COSTS				\$					
40 -	- FOR INFORMATIONAL USE	E ONLY								
17.	Vehicle and Equipment (Amortiza	ation Costs for the Period	1)	\$						
50 -	- TOTAL COSTS									
18.	TOTAL COSTS (Lines 1, 10, &	: 16)			\$					
		CONTRA	CTOR'S CERTIFICA	ATION						
C w	I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.									
	thorized Person (Print Name/Title)	Advance Repayment:								
		CSD AC	CCOUNTING USE ON	NLY						
Pay	ayment: PCA#:									
App	proved By:		Date:							

¹ Enter the reporting period being adjusted. Insert only increases or decreases on each line item being revised using + or - sign.

Contractor Name:			ct Number:		Reporting Period:		Adjustment ¹ :				
Prep	pared By:	E-mail:			Telephone Number:	Fax N	Number:				
60 - '	WEATHERIZED UNITS BY TYPE	85 -	OTHER UNIT T	TYPES							
1.	Owner-Occupied Single Family Site-Built	#	26.	Number of All E	Electric Units		#				
2.	Single-Family Rental Site-Built	#	27.	Number of Units	s With Gas Appliances Not Requirin	g CAS	#				
3.	Multi-Family (over four units)	#	27.	Testing			π				
4.	Owner-Occupied Mobile Home	#	28.	Number of Units	s With FAUs		#				
5.	Renter-Occupied Mobile Home	#	29.	Total Reweather	rized Units		#				
6.	Shelter	#	30.		eiving Assessments and/or Diagnosti	ic Tests	#				
7.	Total Weatherized Units by Type ²	#	30.	But No Other W	eatherization Services		π				
65 - 1	UNITS BY PRIMARY HEATING FUEL		90 -	NUMBER OF P	EOPLE ASSISTED ⁴						
8.	Natural Gas	#	31.	Total Number of	People Assisted (Count each person	n only	#				
9.	Fuel Oil	#	31.	once)		·					
10.	Electricity	#	95 -	DEMOGRAPHI	DEMOGRAPHICS - TYPES OF PEOPLE ASSISTED ³						
11.	Propane/LPG	#	32.	Total Elderly (60	Total Elderly (60 Years or older)						
12.	Kerosene	#	33.	Total Persons wi	Total Persons with Disabilities						
13.	Wood	#	34.	Total Native Am	Total Native American Indians		#				
14.	Other	#	35.	Total Children (Total Children (0 to 18 years)						
15.	Total Units by Primary Heating Fuel ²	#	36.	Total Seasonal F		#					
70 - 1	PROGRAM LEVERAGING - DOE & LIHEAP		37.	Total Migrant Fa	Total Migrant Farm Workers						
16.	DOE Only Units	#	38.	Total Limited En	nglish-Speaking Persons		#				
17.	Combination Units (Leveraged With LIHEAP Wx	#	100	100 - LEAD-SAFE WEATHERIZAED UNITS							
17.	Only)	"	39.	O. Units Built Before 1979 (Include HUD Units)			#				
18.	Total Leveraging Units ²	#	105	- HOUSING ANI	D URBAN DEVELOPMENT (HU	D) UNI	TS				
75 - I	PROGRAM LEVERAGING - ALL PROGRAMS		40.	HUD Units Wea	therized		#				
19.	Combination Units for All Programs	#	41.	HUD Units Buil	t Before 1979		#				
80 - 1	DEMOGRAPHICS - UNITS BY OCCUPANCY ³		42.	-	HUD Units Requiring Certified Lead-Safe Inspections After		#				
20.	Total Elderly (60 Years or older) - Occupied	#		Weatherization							
21.	Total Disabled - Occupied	#			ng period being adjusted. Insert onl	y increa	ses or decreases on				
22.	Total Native American Indians - Occupied	#		each line item be	eing revised using + or - sign.						
23.	Total Children (0 to 18 years) - Occupied	#	2	These totals mus	st match. Do not include reweatheriz	ed units					
24.	Total High Residential Energy User	#		1	eople assisted, may be more than one	e type. D	Oo not include				
25.	Total Household with a High Energy Burden	#		reweatherized units.							

⁴ Do include people in reweatherized units

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Contractor:		Contract Number:			Report Period:		Adjustment I		
Prep	ared By (Print Name/Title):	E-mail Address:	E-mail Address:		Telephone:			Fax Number:	
120 -	MANDATORY HEALTH + SAFETY MEASURE	es .		# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE
1.	Carbon Monoxide Alarm, Line-cord or Hard-wire			#	#	\$	\$	\$	\$
2.	Carbon Monoxide Alarm, Lithium Battery			#	#				
3.	Gas Cooking Appliance Repair			#					
4.	Gas Cooking Appliance Replacement, Range or Cook	к Тор		#					
5.	Gas Water Heater Repair			#					
6.	Gas Water Heater Replacement, Closed Combustion			#					
7.	Gas Water Heater Replacement, Open Combustion			#					
8.	Heating Source Repair, Exterior Wall Direct Vent Fu	rnace		#					
9.	Heating Source Repair, FAU			#					
10.	Heating Source Repair, Floor Furnace			#					
11.	Heating Source Repair, Interior Wall Furnace			#					
12.	Heating Source Repair, Mobile Home Furnace			#					
13.	Heating Source Repair, Other Types Not Listed			#					
14.	Heating Source Repair, Package Unit			#					
15.	Heating Source Repair, Wood-Fueled Appliance			#					
16.	Heating Source Replacement, Exterior Wall Direct V	ent Furnace		#					
17.	Heating Source Replacement, FAU			#					
18.	Heating Source Replacement, Floor Furnace			#					
19.	Heating Source Replacement, Interior Wall Furnace			#					
20.	Heating Source Replacement, Mobile Home Furnace			#					
21.	Heating Source Replacement, Other Types			#					
22.	Heating Source Replacement, Package Unit			#					
23.	Heating Source Replacement, Wood-Fueled Appliance	ce		#					
24.	Lead-Safe Weatherization			#				_	
25.						Total M	andatory Health &	Safety Measure	s \$

¹ Enter the reporting period being adjusted. Insert only increases or decreases on each line item being revised using + or - sign.

Con	stractor:		Contract Number	r:	Report Period:				Adjustment 1
Prep	pared By (Print Name/Title):	E-mail Address:			Telephone:			Fax Number:	
125	- ASSESSMENTS AND DIAGNOSTICS			# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE
26.	Unit Assessment with Attic			#			\$	\$	\$
27.	Unit Assessment without Attic			#					
28.	Combustion Appliance Safety Pre-Test			#					
29.	Combustion Appliance Safety Post-Test			#					
30.	Blower Door Test			#					
31.	Duct Leakage Pre-Test (with Blower Door)			#					
32.	Duct Leakage Post-Test (with Blower Door)			#					
33.	Duct Leakage Pre-Test (with Duct Blaster)			#					
34.	Duct Leakage Post-Test (with Duct Blaster)			#					
35.							Total Assessment	s and Diagnostics	\$
130	- MANDATORY INFILTRATION REDUCTION M	IEASURES		# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE
	Caulking, Mobile Home			#		\$	\$	\$	\$
	Caulking, Multi Unit			#					
38.	Caulking, Single Family			#					
39.	Cover Plate Gaskets			#					
40.	Duct Repair & Replacement			#					
	Glass Replacement			#					
	Minor Envelope Repair			#					
	Sliding Glass Door Repair (Per Door)			#	#				
	Sliding Glass Door Replacement (Per Door)			#	#				
45.	Weatherstripping, Hinged Exterior Door (Per Door)			#	#				
	11 0 0								
	Weatherstripping, Other (Per Linear Foot)			#	LF				
46. 47.				#	LF #				
	Weatherstripping, Other (Per Linear Foot)			#	LF #	Total Mandate	ory Infiltration Re	duction Measures	
47. 48.	Weatherstripping, Other (Per Linear Foot) Window Replacement (Per Window) - MANDATORY GENERAL HEAT WASTE MEAS			# UNIT OF MEASURE	LF # LABOR HOURS		ory Infiltration Rec SUB- CONTRACTOR	duction Measures	\$ RPT PERIOD EXPENDITURE
47. 48. 135 49.	Weatherstripping, Other (Per Linear Foot) Window Replacement (Per Window) - MANDATORY GENERAL HEAT WASTE MEAS Evaporative Cooler/Air Conditioner Vent Cover, Interior	or (Per Cover)			#		SUB-		RPT PERIOD
47. 48. 135 49. 50.	Weatherstripping, Other (Per Linear Foot) Window Replacement (Per Window) - MANDATORY GENERAL HEAT WASTE MEAS	or (Per Cover)			#	MATERIALS	SUB-		RPT PERIOD

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Conti	ractor:		Contract Number	::	Report Period:				Adjustment [
Prepa	ared By (Print Name/Title):	E-mail Address:			Telephone:			Fax Number:	
135 - 1	MANDATORY GENERAL HEAT WASTE MEAS	SURES - continued		# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE
52. H	Hot Water Flow Restrictor, Low-Flow Showerhead (Pe	r Device)		#	#	\$	\$	\$	\$
53. V	Water Heater Blanket (Per Blanket)			#	#				
54. V	Water Heater Pipe Wrap (Per Linear Foot)			#	LF				
55.					Total Man	datory General Hea	t Waste Measures	\$	
140 - 1	MANDATORY PRIORITY ENERGY CONSERVA	ATION MEASURES		# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE
56. F	Floor Insulation, +36" Clearance (Per Sq. Foot) (Zone 4	4)		#	SF	\$	\$	\$	\$
57. F	Floor Insulation, -36" Clearance (Per Sq. Foot) (Zone 4)		#	SF				
58. E	EBL - Evaporative Cooler Installation, New Roof Unit	(Zone 5)		#					
59. E	EBL - Evaporative Cooler Installation, New Wall Unit	(Zone 5)		#					
60. E	EBL - Evaporative Cooler Installation, New Window U	Unit (Zone 5)		#					
61. E	EBL - Evaporative Cooler Installation, Replace Roof U	nit (Zone 5)		#					
62. E	EBL - Evaporative Cooler Installation, Replace Wall U	nit (Zone 5)		#					
63. E	EBL - Evaporative Cooler Installation, Replace Window	w Unit (Zone 5)		#					
64. I	EBL - Evaporative Cooler Repair and Maintenance (Zo	one 5)		#					
65. S	Storm Window, Fixed - Glass Glazing (Zone 5)			#	SF				
66. S	Storm Window, Fixed - Polycarbonate (Zone 5)			#	SF				
67. S	Storm Window, Operable - Glass Glazing (Zone 5)			#	SF				
68. S	Storm Window, Operable - Polycarbonate (Zone 5)			#	SF				
69. A	Attic Ventilation (Zones 4 and 5)			#					
70.	Ceiling Insulation R-11 (Zones 4 and 5)			#	SF				
71.	Ceiling Insulation R-19 (Zones 4 and 5)			#	SF				
72.	Ceiling Insulation R-30 (Zones 4 and 5)			#	SF				
73.	Ceiling Insulation R-38 (Zones 4 and 5)			#	SF				
74. F	Kneewall Insulation R-11 (Zones 4 and 5)			#	SF				
75. F	Kneewall Insulation R-19 (Zones 4 and 5)			#	SF				
76. T	Thermostat, Programmable (Zones 4 and 5)			#					
77.					T	otal Mandatory Pr	iority Energy Cons	ervation Measures	\$

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Contractor:		Contract Numbe	r:	Report Period:				Adjustment 1	
Prep	Prepared By (Print Name/Title): E-mail Address:				Telephone:			Fax Number:	
145	- MANDATORY ELECTRIC BASE LOAD MEASU		# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE	
78.	Compact Fluorescent Lamps, Hard-Wired			#		\$	\$	\$	\$
79.	Compact Fluorescent Lamps, Thread-Based			#	#				
80.	Electric Water Heater Repair			#					
81.	Electric Water Heater Replacement			#					
82.	Refrigerator Replacement (10 Years or Older)			#					
83.						_	Total Electric Bas	e Load Measures	\$
150 -	- OPTIONAL MEASURES			# OF DWELLINGS	UNIT OF MEASURE	MATERIALS	SUB- CONTRACTOR	LABOR	RPT PERIOD EXPENDITURE
84.	NEAT Energy Audit			#		\$	\$	\$	\$
85.	Attic Ventilation (Excludes Zones 4 + 5)			#					
86.	Ceiling Insulation R-11 (Excludes Zones 4 + 5)			#	SF				
87.	Ceiling Insulation R-19 (Excludes Zones 4 + 5)			#	SF				
88.	Ceiling Insulation R-30 (Excludes Zones 4 + 5)			#	SF				
89.	Ceiling Insulation R-38 (Excludes Zones 4 + 5)			#	SF				
90.	Duct Insulation			#	SF				
91.	EBL - Air Conditioning Unit Repair and Maint., Centra	al Unit		#					
92.	EBL - Air Conditioning Unit Repair and Maint., Wall/V	Window		#					
93.	EBL - Air Conditioning Central, Replacement			#					
94.	EBL - Air Conditioning Wall/Window, Replacement M	Iulti-Story Wall Unit		#					
95.	EBL - Air Conditioning Wall/Window, Replacement M	Iulti-Story Window Unit		#					
96.	EBL - Air Conditioning Wall/Window, Replacement Si	ingle-Story Wall Unit		#					
97.	EBL - Air Conditioning Wall/Window, Replacement Si	ingle-Story Window Unit		#					
98.	EBL - Cooling Source Repair, Other Types Not Listed			#					
99.	EBL - Cooling Source Replacement, Other Types Not I	Listed		#					
100.	EBL - Electric Water Heater Timer (Per Timer)			#	#				
101.	EBL - Evaporative Cooler Installation, New Roof Unit	(Excludes Zone 5)		#					
102.	EBL - Evaporative Cooler Installation, New Wall Unit	(Excludes Zone 5)		#					
103.	EBL - Evaporative Cooler Installation, New Window U	Jnit (Excludes Zone 5)		#					
104.	EBL - Evaporative Cooler Installation, Replace Roof U	Unit (Excludes Zone 5)		#					
105.	EBL - Evaporative Cooler Installation, Replace Wall U	Init (Excludes Zone 5)		#					
106.	EBL - Evaporative Cooler Installation, Replace Window	w Unit (Excludes Zone 5)		#					

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CSD 571B (Rev. 03/05)

Con	tractor:		Contract Number	r:	Report Period:				Adjustment ¹
Pren	ared By (Print Name/Title):	E-mail Address:			Telephone:			Fax Number:	
тер	area by (Time Pame) Trae).	2 111111 1 1001 0 0 0 1						Tux Tumoer.	
				# OF	UNIT OF		SUB-		RPT PERIOD
150 -	OPTIONAL MEASURES - continued			DWELLINGS	MEASURE	MATERIALS	CONTRACTOR	LABOR	EXPENDITURE
107.	EBL - Evaporative Cooler Repair and Maintenance (Ex	ccludes Zone 5)		#		\$	\$	\$	\$
108.	Floor Foundation Venting			#					
109.	Floor Insulation, +36" Clearance (Excludes Zone 4)			#	SF				
110.	Floor Insulation, -36" Clearance (Excludes Zone 4)			#	SF				
111.	Kneewall Insulation R-13 (Excludes Zones 4 + 5)			#	SF				
112.	Kneewall Insulation R-19 (Excludes Zones 4 + 5)			#	SF				
113.	Refrigerator Replacement (Less Than 10 Years Old)			#					
114.	Shadescreens			#	SF				
115.	Shutters			#	SF				
116.	Storm Window, Fixed - Glass Glazing (Excludes Zone	5)		#	SF				
117.	Storm Window, Fixed - Polycarbonate (Excludes Zone	5)		#	SF				
118.	Storm Window, Operable - Glass Glazing (Excludes Zo	one 5)		#	SF				
119.	Storm Window, Operable - Polycarbonate (Excludes Z	one 5)		#	SF				
120.	Thermostat, Manual			#					
121.	Thermostat, Programmable (Excludes Zones 4 + 5)			#					
122.	Tinted Window Film			#	SF				
123.	Wall Insulation, Stucco and Wood			#	SF				
124.							Total C	ptional Measures	\$
155 -	OTHER WEATHERIZATION COSTS			DWELLINGS		FEES		LABOR	RPT PERIOD EXPENDITURE
125.	Disposal Fees			#		F		\$	\$
126.	Permits			#		F			
127.							Total Other We	atherization Costs	\$
160 -	TRAVEL COSTS			DWELLINGS	MILES	RATE			RPT PERIOD EXPENDITURE
128.	Single Family Dwelling (1 to 4 Units)			#		X			\$
129.	Multi-Family Dwelling (5 or More Units)			#		X 3.00			
130.	Mileage Outside of 60-Mile Round Trip			#	#	X 0.66			
131.	Vehicle Insurance					\$			
132.							7	Total Travel Costs	\$
165 -	TOTAL DIRECT PROGRAM ACTIVITIES								GRAND TOTAL
133.					Total Direct P	rogram Activities (Lines 35, 48, 55, 7'	7, 83,124,127,132)	\$

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